EXHIBIT 3

B 10 (Official Form 10) (12/11)					
United States Bankruptcy	COURT Southern DISTRICT OF 1	New York		PROOF OF CLAIM	
Name of Debtor:		Case Number:			
Residential Capital, LLC		12-12020			
			4 ∫34	GEIVER	
			JIK F		
	claim for an administrative expense that arise ment of an administrative expense according		îling. You	JUL - 2 2012	
	tity to whom the debtor owes money or prope	•			
Paul N. Papas II	any to whom the decide over money of proper	. (<i>. j.</i>		S BARKAUPICY COURT	
Name and address where notices should	ho cont			COURTMENSONLY	
HATO 7 G B M D I				eck this box if this claim amends a usly filed claim.	
4777 E Bell Rd Ste 45-350 Phoenix AZ 85032 Telephone number: 602-493-2016 Parl_Papaso My Legal Help USA. Com. Name and address where payment should be sent (if different from above):				mony mon exami:	
01 107	Court	Claim Number:			
Telephone number:	(<i>y</i> k	nown)			
607-493-2016	SA. Com Filed o	on:			
Name and address where payment should be sent (if different from above):				ck this box if you are aware that	
				e else has filed a proof of claim g to this claim. Attach copy of	
				ent giving particulars.	
Telephone number:	email:				
-					
1. Amount of Claim as of Date Case F	iled: \$10,000,000,000			111211 - 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
If all or part of the claim is secured, com	plete item 4.				
If all or part of the claim is entitled to pri	ority, complete item 5.				
☐ Check this box if the claim includes in	terest or other charges in addition to the princi	ipal amount of the clain	n. Attach a statemen	t that itemizes interest or charges.	
	Fraudulent Transfers of Title By			<u> </u>	
(See instruction #2)	Traduction Transfers of Title By	The Debioi			
	The second secon				
3. Last four digits of any number	3a. Debtor may have scheduled account a	nt as: 3b. Uniform Claim Identifier (optional):			
by which creditor identifies debtor:	•		(- 	
	(See instruction #3a)	(See instruction	#3h)		
4.6				rges, as of the time case was filed,	
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is	included in secu	included in secured claim, if any:			
Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.			s 10,000,000,000		
Nature of property or right of setoff.	D . c . c .	Basis for perfection: Lis Pendens + Court Filings			
Describe:	Real Estate Motor Vehicle Other	Basis for perfect	non: Lis i elidei	is i Court imigs	
Value of Property: \$		Amount of Secu	Amount of Secured Claim: \$10,000,000,000		
Annual Interest Rate % ☐Fixe	d or □ Variable	Amount Unsecu	red: § 0		
(when case was filed)	u oi livanabic	Amount Onsecu	icu. 5 <u>0</u>		
5. Amount of Claim Entitled to Priorit the priority and state the amount.	y under 11 U.S.C. §507(a). If any part of th	ne claim falls into one	of the following cate	egories, check the box specifying	
☐ Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B). ☐ Wages, salaries, or commissions (up to \$11,725*) ☐ Contributions to an employee benefit plan —					
	debtor's business ceased, whichever is ea		ployee benefit plan – U.S.C. §507 (a)(5).		
	11 U.S.C. §507 (a)(4).		c.s.c. \$507 (a)(5).	Amount entitled to priority:	
☐ Up to \$2,600* of deposits toward	ntal units – (3)	0.1 0 0	\$ 10,000,000,000		
purchase, lease, or rental of property or		Other – Specify licable paragraph of			
services for personal, family, or household		11	U.S.C. §507 (a)().	RECEIVED	
use – 11 U.S.C. §507 (a)(7).					
*Amounts are subject to adjustment on 4	1/13 and every 3 years thereafter with respect		o	JUL 0 9 2012	
	um every 5 yeurs inereafter with respect	to cases commenced of	n or after ti	OUL OU LUIL	
6. Credits. The amount of all payments	on this claim has been credited for the purpose	of making this proof o	of claim. (S	KURTZMAN CARSON CONSULTANTS	

B 10 (Official Form 1	0) (12/11)		
running accounts, con providing evidence of	tracts, judgments, mortgages, and security agre perfection of a security interest are attached.	ements. If the claim is secured, box 4 (See instruction #7, and the definition of	notes, purchase orders, invoices, itemized statements of has been completed, and redacted copies of documents of "reducted".)
DO NOT SEND ORIGINAL SERVICE S	GINAL DOCUMENTS. ATTACHED DOCUMENT OF hers over a vailable of available, please explain: Documen	MENTS MAY BE DESTROYED AFT	erscanning. Eggy of one Listenden.
8. Signature: (See in			
Check the appropriate	box.		
☑ I am the creditor.	☐ I am the creditor's authorized agent. (Attach copy of power of attorney, if any.)	☐ I am the trustee, or the debtor, or their authorized agent. (See Bankruptcy Rule 3004.)	☐ I am a guarantor, surety, indorser, or other codebtor. (See Bankruptcy Rule 3005.)
I declare under penalty	y of perjury that the information provided in th	is claim is true and correct to the best of	f my knowledge, information, and reasonable belief.
Print Name: Paul N Title: Company:		= Ply	26 June 2012
	number (if different from notice address abov	re): (Signature)	(Date)
85032	, Ste 45-350, Phoenix, AZ Paul Papa:		RECEIVED

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both.

JUL 0 9 2012

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy & KURTZMAN CARSON CONSULTANTS; exceptions to these general rules may apply.

Items to be completed in Proof of Claim form

Court, Name of Debtor, and Case Number:

Fill in the federal judicial district in which the bankruptcy case was filed (for example, Central District of California), the debtor's full name, and the case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is at the top of the notice.

email:

Creditor's Name and Address:

Telephone number:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

1. Amount of Claim as of Date Case Filed:

State the total amount owed to the creditor on the date of the bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

2. Basis for Claim:

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on delivering health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if an interested party objects to the claim.

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor: State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

3a. Debtor May Have Scheduled Account As:

Report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

3b. Uniform Claim Identifier:

If you use a uniform claim identifier, you may report it here. A uniform claim identifier is an optional 24-character identifier that certain large creditors use to facilitate electronic payment in chapter 13 cases.

4. Secured Claim:

Check whether the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See Definitions.) If the claim is secured, check the box for the nature and value of property that secures the claim, attach copies of lien documentation, and state, as of the date of the bankruptcy filing, the annual interest rate (and whether it is fixed or variable), and the amount past due on the claim.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. §507(a).

If any portion of the claim falls into any category shown, check the appropriate box(es) and state the amount entitled to priority. (See Definitions.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

6. Credits:

An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

7. Documents:

Attach redacted copies of any documents that show the debt exists and a lien secures the debt. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary in addition to the documents themselves. FRBP 3001(c) and (d). If the claim is based on delivering health care goods or services, limit disclosing confidential health care information. Do not send original documents, as attachments may be destroyed after scanning.

8. Date and Signature:

The individual completing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what constitutes a signature. If you sign this form, you declare under penalty of perjury that the information provided is true and correct to the best of your knowledge, information, and reasonable belief. Your signature is also a certification that the claim meets the requirements of FRBP 9011(b). Whether the claim is filed electronically or in person, if your name is on the signature line, you are responsible for the declaration. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. If the claim is filed by an authorized agent, attach a complete copy of any power of attorney, and provide both the name of the individual filing the claim and the name of the agent. If the authorized agent is a servicer, identify the corporate servicer as the company. Criminal penalties apply for making a false statement on a proof of claim.

12-12020-mg Doc 4947-17 Filed 09/04/13 Entered 09/04/13 17:32:38 Exhibit 3 to Objection - Proof of Claim Pg 4, of 5

4, of 5.

OFFICIAL RECORDS OF MARICOPA COUNTY RECORDER HELEN PURCELL 2012-0193607 03/08/12 11:17 AM 1 OF 1

Paul N. Papas II 4727 E Bell Rd., #45 PMB 350 Phoenix, AZ 85032 602-493-2016

Superior Court of Arizona in Maricopa County

Paul N. Papas II, et al

CV 2012- 05/622

NOTICE OF LIS PENDENS

VS

Peoples Mortgage Company

and

GMAC Mortgage, LLC

LIS PENDENS

TO WHOM IT MAY CONCERN:

Notice is hereby given that the above-entitled action has been filed and is now pending in the Superior Court, State of Arizona, County of Maricopa. The parties hereto are as shown above. The Plaintiff seeks a Declaratory Judgment, Injunctive Relief, and to Quiet Title and has a claim pursuant to the Uniform Fraudulent Transfer Act ARS 44-1001, et seq. concerning 8025 East Krail Street, Scottsdale, Arizona, 85250 APN 174-11-130-8 in which he seeks to set aside the fraudulent transfers. He also holds an Option to Purchase the property.

Plaintiff seeks to have his lien adjudged a first and prior lien against premises, superior to the interests and liens of all defendants joined in this action, and that upon foreclosure of plaintiffs lien, all of the defendants and all persons claiming by, through or under them, be barred and foreclosed of all their right, title, interest or claim of lien against the premises, except only their rights of redemption as by law provided.

THEREFORE, for the above stated reasons all persons having any interest in the property are on notice that the Plaintiff is prosecuting his claim on this property and presents this *Lis Pendens* pursuant to ARS 12-1191 and *Farris v Advantage Capital Corporation*. Arizona Supreme Court CV-07-0114-CQ.

Dated March 7, 2012

Paul N. Papas II

4727 E Bell Rd., #45 PMB 350

Phoenix, AZ 85032

602-493-2016

Kathrina H. Tobias

The above Kathrina H. Tobias personally appeared before me and signed this of her own free will on this 2 day of March 2012.

Notary Public

